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## APPLICANTS

William J. Allen, Corvallis, OR;

\*\* CONTINUING DATA \*\*\*\*\* None(M.H.)

\*\* FOREIGN APPLICATIONS \*\*\*\*\* None(M.H.)

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 01/29/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY OR	SHEETS DRAWING 6	TOTAL CLAIMS 32	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance M.H.				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

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## ADDRESS

22879  
 HEWLETT PACKARD COMPANY  
 P O BOX 272400, 3404 E. HARMONY ROAD  
 INTELLECTUAL PROPERTY ADMINISTRATION  
 FORT COLLINS , CO  
 80527-2400

## TITLE

Image display system and method

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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